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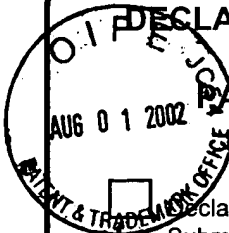
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 DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	<input type="checkbox"/> Declaration Submitted with Initial Filing	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Dock t Numb r	4-31704A
			First Named Inventor	Cheng Cheng
	COMPLETE IF KNOWN			
	Application Number	10/081,969		
	Filing Date	02/22/2002		
			Art Unit	
			Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL ONCOLYTIC ADENOVIRAL VECTORS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/22/2002 as United States Application Number or PCT International

Application Number 10/081,969 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

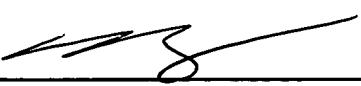
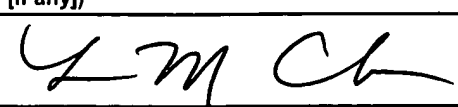
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

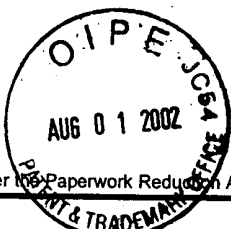
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Address							
City				State		ZIP	
Country			Telephone			Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Cheng				Cheng			
Inventor's Signature 				Date			
Rockville				MD		US	
Residence: City				State		Country	
12004 Montrose Village Terrace				China			
Mailing Address				Citizenship			
Rockville				MD		20852	
City				State		ZIP	
US				Country			
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Lori				Clarke			
Inventor's Signature 				Date			
Olney				MD		US	
Residence: City				State		Country	
17608 Stafford Court				US			
Mailing Address				Citizenship			
Olney				MD		21754	
City				State		ZIP	
US				Country			
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							



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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>5</u>
--------------------	-----------------------------------------------------------------------------------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Sheila <small>Given Name</small>		Connelly <small>Family Name or Surname</small>	
Inventor's Signature <i>Sheila Connelly</i>		Date <i>15-July-02</i>	
Ijamsville <small>Residence: City</small>	MD <small>State</small>	US <small>Country</small>	US <small>Citizenship</small>
11012 Graymarsh Place <small>Mailing Address</small>			
Mailing Address			
Ijamsville <small>City</small>	MD <small>State</small>	21754 <small>ZIP</small>	US <small>Country</small>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
David Leonard <small>Given Name</small>		Ennist <small>Family Name or Surname</small>	
Inventor's Signature <i>David Leonard</i>		Date <i>9-July-2002</i>	
Bethesda <small>Residence: City</small>	MD <small>State</small>	US <small>Country</small>	US <small>Citizenship</small>
9715 DePaul Drive <small>Mailing Address</small>			
Mailing Address			
Bethesda <small>City</small>	MD <small>State</small>	20817 <small>ZIP</small>	US <small>Country</small>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Suzanne <small>Given Name</small>		Forry-Schaudies <small>Family Name or Surname</small>	
Inventor's Signature <i>Suzanne Forry-Schaudies</i>		Date <i>9-July-02</i>	
Rockville <small>Residence: City</small>	MD <small>State</small>	US <small>Country</small>	US <small>Citizenship</small>
14801 Marlin Terrace <small>Mailing Address</small>			
Mailing Address			
Rockville <small>City</small>	MD <small>State</small>	20853 <small>ZIP</small>	US <small>Country</small>

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 2 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Mario		Gorziglia	
Given Name		Family Name or Surname	
Inventor's Signature <i>Mario Gorziglia</i>		Date <i>July 19, 2002</i>	
Doylestown	PA	US	Venezuela ALFACON H6 Citizenship US
Residence: City State Country			
92 Abbey Circle 5126 Harmony Court South H6			
Mailing Address			
Mailing Address			
Doylestown	PA	18901	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Paul L.		Hallenbeck	
Given Name		Family Name or Surname	
Inventor's Signature <i>Paul L. Hallenbeck</i>		Date <i>July 15, 2002</i>	
Gaithersburg	MD	US	US
Residence: City State Country			
7461 Rosewood Manor Lane			
Mailing Address			
Mailing Address			
Gaithersburg	MD	20882	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Carl M.		Hay	
Given Name		Family Name or Surname	
Inventor's Signature <i>Carl M. Hay</i>		Date <i>7-3-02</i>	
Damascus	MD	US	US
Residence: City State Country			
28301 Honeysuckle Drive			
Mailing Address			
Mailing Address			
Damascus	MD	20872	US
City	State	ZIP	Country

PTO/SB/02A (10-00)
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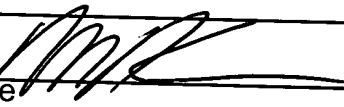
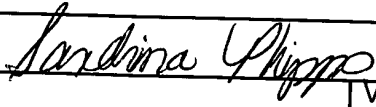
DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>5</u>
--------------------	----------------------------------------------------------------------------------

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
John Leonard		Jakubczak	
Given Name	Family Name or Surname		
 Inventor's Signature		July 3, 2002 Date	
Germantown	MD	US	US
Residence: City	State	Country	Citizenship
12926 Summit Ridge Terrace			
Mailing Address			
Mailing Address			
Germantown	MD	20874	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Michael		Kaleko	
Given Name	Family Name or Surname		
 Inventor's Signature		Date	
Rockville	MD	US	US
Residence: City	State	Country	Citizenship
8 Hearthstone Court			
Mailing Address			
Mailing Address			
Rockville	MD	20854	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Sandrina		Phipps	
Given Name	Family Name or Surname		
 Inventor's Signature		Date	
Reston	VA	US	US
Residence: City	State	Country	Citizenship
2319 Rosedown Drive			
Mailing Address			
Mailing Address			
Reston	VA	20191	US
City	State	ZIP	Country

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>5</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
John Leonard				Jakubczak			
Given Name				Family Name or Surname			
Inventor's Signature				Date			
Germantown		MD		US		US	
Residence: City		State		Country		Citizenship	
12926 Summit Ridge Terrace							
Mailing Address							
Mailing Address							
Germantown		MD		20874		US	
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Michael				Kaleko			
Given Name				Family Name or Surname			
Inventor's Signature 				Date <u>July 2, 2002</u>			
Rockville		MD		US		US	
Residence: City		State		Country		Citizenship	
8 Hearthstone Court							
Mailing Address							
Mailing Address							
Rockville		MD		20854		US	
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Sandrina				Phipps			
Given Name				Family Name or Surname			
Inventor's Signature 				Date <u>July 2, 2002</u>			
Reston		VA		US		US	
Residence: City		State		Country		Citizenship	
2319 Rosedown Drive							
Mailing Address							
Mailing Address							
Reston		VA		20191		US	
City		State		ZIP		Country	

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DECLARATION

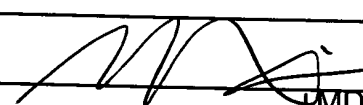
ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 5

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Seshidhar Reddy		Police	
Given Name		Family Name or Surname	
Inventor's Signature <i>P. Seshidhar Reddy</i>		Date <i>9 July, 02</i>	
Gaithersburg	MD	US	Canada
Residence: City	State	Country	Citizenship
722 Clopper Road			
Mailing Address			
Apartment 11			
Mailing Address			
Gaithersburg	MD	20578	Canada
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Patricia Clare		Ryan	
Given Name		Family Name or Surname	
Inventor's Signature <i>Patricia Clare Ryan</i>		Date <i>July 3, 2002</i>	
Montgomery Village	MD	US	US
Residence: City	State	Country	Citizenship
10637 Seneca Spring Way			
Mailing Address			
Mailing Address			
Montgomery Village	MD	20886	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
David A.		Stewart	
Given Name		Family Name or Surname	
Inventor's Signature <i>David A.</i>		Date <i>July 3, 2002</i>	
Eldersburg	MD	US	US
Residence: City	State	Country	Citizenship
6023 Kennard Court			
Mailing Address			
Mailing Address			
Eldersburg	MD	21784	US
City	State	ZIP	Country

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Yuefeng		Xie	
Given Name	Family Name or Surname		
Inventor's Signature 		Date July 1, 2002	
Germantown	MD	US	China
Residence: City	State	Country	Citizenship
13921 Rockingham Road			
Mailing Address			
Mailing Address			
Germantown	MD	20874	China
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

☒ Practitioners at Customer Number

001095 →

Place Customer
Number Bar Code
Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all
business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

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Number Bar Code
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☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant r Assignee f R cord

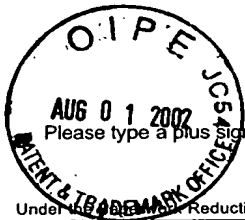
Name

Cheng Cheng

Signature

Date

July 3, 2002



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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

☒ Practitioners at Customer Number

001095

Place Customer
Number Bar Code
Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

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☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Lori Clarke

Signature

Lori Clarke

Date

May 3, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 24 15 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic
Group Art Unit	Adenoviral Vectors
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

☒ Practitioners at Customer Number

001095

Place Customer
Number Bar Code
Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

Place Customer
Number Bar Code
Label here

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Sheila Connelly

Signature

Sheila Connelly

Date

May 2, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 14 15 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic
Group Art Unit	Adenoviral Vectors
Examiner Name	
Attorney Docket Number	4-31/04A

I hereby appoint:

☒ Practitioners at Customer Number

001095

Place Customer
Number Bar Code
Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer NumberPlace Customer
Number Bar Code
Label here

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

David Leonard Ennist

Signature

David L. Ennist

Date

9-May-2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 14 15 forms are submitted.

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**POWER OF ATTORNEY OR
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Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic
Group Art Unit	Adenoviral Vectors
Examiner Name	
Attorney Docket Number	4-31704A

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SIGNATURE of Applicant or Assignee of Record

Name Suzanne Forry-Schaudies

Signature

Date

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SIGNATURE of Applicant or Assignee of Record

Name

Paul L. Hallenbeck

Signature

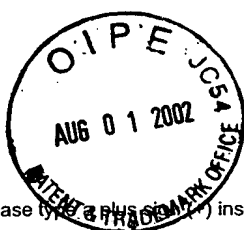
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SIGNATURE of Applicant or Assignee of Record

Name

Carl M. Hay

Signature

Carl M. Hay

Date

5/9/02

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Name John Leonard Jakubczak

Signature

Date

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SIGNATURE of Applicant or Assignee of Record

Name Michael Kaleko

Signature

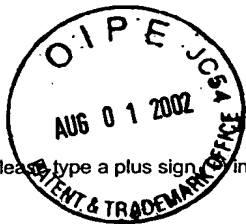
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SIGNATURE of Applicant or Assignee of Record

Name Sandrina Phipps

Signature *Sandrina Phipps*

Date *May 3, 2002*

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Name Seshidhar Reddy Police

Signature P. Seshidhar Reddy

Date 9 May 02

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Name

Patricia Clare Ryan

Signature

Patricia Clare Ryan

Date

mch 30, 2002

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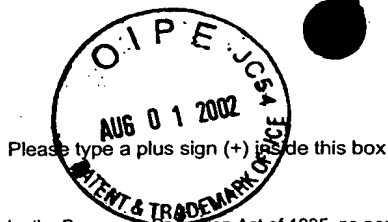
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Yuefeng Xie

Signature

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